SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)					PAGE 113419 / 312709						
	16	×	17a		17b		17c		17d		18
	19a		19b		20a		20b		20c		21

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) Carol G. Kloster	Transaction ID: C29060357		
Mailing Address 619 W. North St		Date of Receipt M	
City Hinsdale	State Zip Code IL 60521		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period	
Name of Employer Readerlink	Occupation CEO	500.00	
Receipt For: 2012 Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 4500.00		
Full Name (Last, First, Middle Initial) Margaret Kloster	Transaction ID : C28473645 Date of Receipt		
Mailing Address 5140 Chowen Ave S		10 28 2012	
City Minneapolis	State Zip Code MN 55410-2151		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period	
Name of Employer HealthPartners Inc	Occupation RN	25.00	
Receipt For: 2012 Primary	Election Cycle-to-Date 391.00		
Full Name (Last, First, Middle Initial) Margaret Kloster	Transaction ID : C28473650 Date of Receipt		
Mailing Address 5140 Chowen Ave S		M M / D D / Y Y Y Y Y 1 Y 10 10 28 2012	
City Minneapolis	State Zip Code MN 55410-2151		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period	
Name of Employer HealthPartners Inc	Occupation RN	25.00	
Receipt For: 2012 Primary General Other (specify) ▼	Election Cycle-to-Date 391.00		
Subtotal Of Receipts This Page (op	tional)	550.00	
		7	